| SEP 1 : | اپر ۔۔۔ | w , | or] | P.O. Box 1450 Alexandria, Vii Fax (571) 273-2885 | Patents rginia 22313-1450 | |
|--|--|--|--|---|--|--|
| INSTRUCTIONS: This for appropriate. All further condicated unless perfect and instance for perfe | orm should be used for tran rrespondence including the l balls or directed otherwise | smitting the ISSU Patent, advance or in Block 1, by (a | JE FEE and ders and noti | PUBLICATION FEE (if rec fication of maintenance fees a new correspondence address | uired). Blocks 1 through/ will be mailed to the curr ss; and/or (b) indicating a | 75 should be completed where rent correspondence address as separate "FEE ADDRESS" for |
| CURRENT CORRESPONDENCE 47888 7 | CE ADDRESS (Note: Use Block 1 for 97/07/2005 | | Note: A certificate of Fee(s) Transmittal. T | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | |
| HEDMAN & CO 1185 AVENUE O NEW YORK, NY | F THE AMERICAS | | | I hereby certify that States Postal Service addressed to the M | ertificate of Mailing or Ta this Fee(s) Transmittal is b e with sufficient postage for ail Stop ISSUE FEE adds SPTO (571) 273-2885, on t | peing deposited with the United r first class mail in an envelope ress above, or being facsimile |
| 09/14/2005 HDESTA2 00000005 081540 10789626 | | | | James Vo | | (Depositor's name) |
| 01 FC:2501 02 FC:1504 03 FC:8001 6 | 700.00 DP 300.00 DP | | | September | (a), 3005 | (Signature) (Date) |
| APPLICATION NO. | TION NO. FILING DATE | | FIRST NAMEI | DINVENTOR | ATTORNEY DOCKET NO | O. CONFIRMATION NO. |
| 5 10/789,626 | 10/789,626 .02/26/2004 | | | z Alvarado | 163-535 | 7664 |
| TITLE OF INVENTION: M | METHOD AND SYSTEM FO | OR THE PREDICT | TION OF EAI | RTHQUAKES | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE F | EE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | nonprovisional YES | |) | \$300 | \$1000 | 10/07/2005 |
| EXAMINER | | ART UNIT | | CLASS-SUBCLASS | | |
| MCELHENY JR, DONALD E | | 2857 | | 702-015000 | _ | |
| CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica | dence address or indication of "Formula dence address" (or Change of 122) attached. attorn (or "Fee Address" Indicator more recent) attached. Use | Correspondence | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| PLEASE NOTE: Unless | D RESIDENCE DATA TO B s an assignee is identified be n 37 CFR 3.11. Completion | low, no assignee | data will app | ear on the patent. If an assi | gnee is identified below, the | he document has been filed for |
| (A) NAME OF ASSIGN | IEE | (E | 3) RESIDENC | CE: (CITY and STATE OR C | OUNTRY) | |
| Windsor Mar | nagement Luxembo | urg S.A. | | Luxembourg | | |
| Please check the appropriate | e assignee category or catego | ries (will not be pr | rinted on the p | atent): 🗖 Individual 🛣 | Corporation or other privat | e group entity Government |
| 4a. The following fee(s) are | enclased | 41 | D. Payment of | · / | | |
| ✓ Issue Fee ✓ Publication Fee (No small entity discount permitted) | | | A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. | | | |
| Advance Order - # o | | | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-1540 (enclose an extra copy of this form). | | | |
| a. Applicant claims S | s (from status indicated above SMALL ENTITY status. See | 37 CFR 1.27. | | cant is no longer claiming SM | | |
| The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec | is requested to apply the Issu Publication Fee (if required) v cords of the United States Pat | ne Fee and Publica vill not be accepte ant and Trademark | tion Fee (if ard from anyone of Office. | ny) or to re-apply any previous other than the applicant; a re | asly paid issue fee to the appears; egistered attorney or agent; | plication identified above. or the assignee or other party in |
| Authorized Signature | W/S | | | Date | eptember 9, 200 | 05 |
| Typed or printed name James V. Costigan | | | Registration No25,669 | | | |
| This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virginia 22313 Alexandria. Virginia 22313 | lity is governed by 35 U.S.C. application form to the USPT is for reducing this burden, sl ginia 22313-1450. DO NOT | 11. The information 122 and 37 CFR O. Time will vary tould be sent to the SEND FEES OR | on is required 1.14. This co depending u e Chief Infort COMPLETEI | to obtain or retain a benefit b llection is estimated to take 1 pon the individual case. Any nation Officer, U.S. Patent at D FORMS TO THIS ADDRE | y the public which is to file 2 minutes to complete, incl comments on the amount of d Trademark Office, U.S. SS. SEND TO: Commission | (and by the USPTO to process) luding gathering, preparing, and of time you require to complete Department of Commerce, P.O. oner for Patents, P.O. Box 1450, |

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.